

LETTER TO EDITOR

Do We Supply Enough Information about Preventing Risky Ways of Blood Transmitted Diseases for Health Care Workers?

Dear Editor:

About 3 years ago when I was a medical intern in a crowded university hospital in Yazd (central part of Iran), I have had a lot of information about hepatitis and HIV viruses, ways of transmissions and also appropriate therapy in emergency situation that I must do for prevention of disease, but any one in any classes did not educated anything to me about the ways that I can avoid risky situations. How I could avoid being needle stick? What I must do when I faced with such a patient? I was encountering with a lot of potentially HIV and hepatitis positive patients and was not aware of potential risk that I was facing with.

At one night a patient came into emergency ward. He had cut herself with knife and had a lot of sharp wounds; this patient was so interesting for me. I did not attend to soldiers that had brought him into emergency ward, I even did not attend to his foots that was tight with tow. In fact he was a prisoner, an IV drug abuser patient hepatitis B and HIV positive that had been injured by himself. I tried to exam his wounds and; in a while one hematoma in one of his wounds ruptured and bloods containing of it poured to my face. After that I washed my face, one of soldiers came and said what did you do Doctor? He was hepatitis B positive, I said no problem I am vaccinated, He said he is HIV positive too. That was one of my worst moments in my life; because I could not be assured that my eye and oral cavity had not been contacted by blood and theoretically there is about .09% probability of being contaminated by virus. In next 6 month I was scaring about contamination with HIV virus until my Lab test became negative all. This is an experience is repeatedly occurring in our health systems. What are our pitfalls? Do we have supplied enough attention to health system workers real needs? Now after that experience I know that must be aware of this reality that all of our patients are potentially contaminated with these diseases. But do all of our health care workers have this knowledge or all must touch this bad experience themselves? An experience that can be the first and also the last opportunity. What are responsibilities of educational systems, health system managers and policy makers? This situation is near to all of us. Our teaching programs need fundamental revisions, our field is not theoretical, we interact with our patients by our knowledge and this is a missing part in our teaching programs.

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